

FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE

Sandra Northern

DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 JAN 22 PM 1:44

1. Name of Limited Partnership

1a. DOCUMENT #

B9600000445

Andros Isle Limited Partnership

Mailing Address

Principal Office Address

3. Date Formed or Registered

11/22/96

5a. Capital Contributions as
Shown on record.

\$14,000,000.00

3a. Date of Last Report

Initial Report

5b. Amount of Capital
Contributions in FLORIDA
to date:

\$14,000,000.00

4. State or Country of Formation

Virginia

2. Mailing Address

448 Viking Drive

2a. Principal Office Address

448 Viking Drive

Suite, Apt. #, etc.

Suite 220

Suite, Apt. #, etc.

Suite 220

City & State

Virginia Beach, Virginia

City & State

Virginia Beach, Virginia

Zip

23452

Country

U.S.A.

Zip

23452

Country

U.S.A.

6. FEI Number

54-1823522

☐ Applied For
☐ Not Applicable

7. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

10. If changed, new Registered Agent/Office

Corporation Service Company
1201 Hays Street
Tallahassee, Florida 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) _____ DATE _____

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s)

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

11b. City, State & Zip Code

11c. Registration/
Document Number

Sandler at Andros Isle,
Inc.

448 Viking Drive
Suite 220

Virginia Beach, Virginia 23452

600002070676--2

-01/28/97--01124--006

*****541.25 *****541.25

600002070676--2

-01/28/97--01124--007

*****8.75 *****8.75

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

DATE 1-21-97

Typed or Printed Name of General Partner Signing Form Steven B. Sandler, President Daytime Telephone Number (757) 463-5000

CR2E003 (6/96)